ORDER FOR SUPPLIES AND SERVICES					IMPORTANT: See instructions in GSAR 553.370-300-1 for distribution				PAG	E 1 OF 1 PAGE(
1. DATE OF ORDER 09/25/2015		2. ORDE GSQ0115	R NUMBER BK0285		CONTRACT -35F-0548S	Γ NUMBE	MBER 4. ACT NUMBER A21983685					
FOR	5, ACCOUNTING CLASSIF				TION	6. FINANCE DIVISION						
GOVERNMENT USE ONLY	FUND b(4)	ORG B/A COL CODE F1		0/0 1 <mark>b</mark> (C CODE 4)	AC		SS	VENDOR NAME	OOR NAME		
	FUNC CODE (5(4)	C/E CODE	PROJ./PROS. NO.	СС	-A	MDL		FI	G/L D	EBT		
	W/ITEM	СС-В	PRT./CRFT			Al		LC	DISC	TNUC		
7. TO: CONTRACTOR (Name, address and zip code) Laura Smearman SCIENTIFIC TECHNOLOGIES CORPORATION 8444 N 90TH ST STE 100 SCOTTSDALE, AZ 852584437						8. TYPE OF ORDER B. DELIVERY Please fumish the following on the terms specified on both sides of the order and the attached sheets, if any, including delivery as indicated.						
United States 520-202-3333						This delivery order is subject to instructions contained of this side only of this form and is issued subject to the terms and conditions of the above numbered contract.						
						C. MODIFICATION NO. 000 TYPE OF MODIFICATION: AUTHORITY FOR ISSUING						
9A. EMPLOYER'S IDENTIFICATION NUMBER 860605013 9B. CHECK, IF APPROP WITHHOLD 20%					PROP	Except as provided herein, all terms and conditions of th original order, as heretofore modified, remain unchanged						
10A. CLASSIFICATION Veteran Owned Business 11. ISSUING OFFICE 12. REMITTANCE ADDRESS						10B. TYPE OF BUSINESS ORGANIZATION C. Corporation						
Address, zip code elephone no.) SSA Region 01 Kimberly KG Yates 10 CAUSEWAY ST 3OSTON, MA 0222 Jnited States 617) 565-6013	2-1048	(MANDATORY) SCIENTIFIC TECHNOLOGII CORPORATION 8444 N 90TH ST STE 100 SCOTTSDALE,AZ 85258-443 United States				13. SHIP TO(Consignee address, zip code and telephone no.) Sharon Cunningham 1600 Clifton Road NE (M/S E61] Atlanta, GA 30333 United States (404) 639-8563						
14. PLACE OF INSPECTION AND ACCEPTANCE Sharon Cunningham 1600 Clifton Road NE (M/S E61] Atlanta, GA 30333 United States			PTANCE	15. REQUISITION OFFICE (Name, symbol and telephone no.) Jennifer M Sampson GSA Region 01 10 Causeway Street Boston, MA 02222-0000 United States (617) 565-7611								
6. F.O.B. POINT Destination	umu	17. GOVI NO.				OR BEFORE 09/25/2016				19. PAYMENT/DISCOUNT TERMS NET 30 DAYS / 0.00 % 0 DAYS / 0.00 % 0 DAYS		
Contractor is to pro August 2015 as w Procurement.			rials to perform	in a		with RFC						
ITEM NO.	SUPPLIES OR SERVICES (B)				ORDERED		UNIT (D)	UNIT PRI (E)	CE	AMOUNT (F)		
	Base Year Labor						lot	\$664,7	50.00	\$664,750.00		
	Base Year Travel (NTE)				1 lot			\$15,0	_	\$15,000.00		
21. RECEIVING OFFICE (Name, symbol and telephone no.) Centers for Disease Control and Prevention, (404) 639-8563							<u> </u>	TOTAL From 300-A(s)		710,000,00		
22. SHIPPING POINT 23. GROSS SE				HIP WT.				GRAND \$679,750.00				
25A. FOR INQUIRIES REGAI CONTACT: GSA Finance Customer Support The contractor shall follow these Invoice						DING PAYMENT 25B. TELEPHONE NO. 816-926-7287						